

**LONG-TERM ASSIGNMENT (LTA) INFORMATION AND  
CERTIFICATION OF SUBSISTENCE RATES**

STD. 653 (REV. 6-94) FMC

**For definition of LTA and Privacy Notice,  
see reverse side.****IMMEDIATE SUPERVISORS WILL SEE THAT THIS FORM IS COMPLETED BY EACH NEWLY ASSIGNED EMPLOYEE AND REVIEWED QUARTERLY FOR  
OTHER EMPLOYEES. A NEW ASSIGNMENT AND CERTIFICATION MUST BE SUBMITTED WHENEVER THERE IS ANY CHANGE IN THE INFORMATION.**

1. EMPLOYEE'S NAME <i>(Print or type)</i>	2. CIVIL SERVICE EXEMPT CLASSIFICATION	3. DESIGNATED HEADQUARTERS ((HQ)
4. PERMANENT RESIDENCE ADDRESS		5. ADDRESS TO WHICH SALARY AND EXPENSE CHECKS SHOULD BE SENT
6. NUMBER OF MILES BETWEEN THE FOLLOWING LOCATIONS <div style="display: flex; justify-content: space-between;"> <div>HQ AND LTA LOCATIONS _____</div> <div>PRIMARY RESIDENCE AND LTA LOCATION _____</div> <div>LTA RESIDENCE AND LTA JOBSITE _____</div> </div>		
7. LTA PURPOSE	8. LTA/JOBSITE LOCATION <i>(City)</i>	9. DISTRICT
10. REPORTING DATE		11. ESTIMATED COMPLETION DATE
12. RESIDENCE ADDRESS AT LTA LOCATION		

13. I HAVE THE FOLLOWING DEPENDENTS *(As defined by IRS standards)*

☐ NONE

☐ SPOUSE

☐ NUMBER OF CHILDREN \_\_\_\_\_

☐ PARENTS

☐ OTHER *(Please explain on the reverse of this sheet)*

14. DURING THIS ASSIGNMENT, MY DEPENDENTS

☐ WILL

☐ WILL NOT REMAIN AT MY PRIMARY RESIDENCE

15. DURING THIS ASSIGNMENT, I

☐ WILL

☐ WILL NOT MAINTAIN MY PRIMARY RESIDENCE AT A NET EXPENSE TO ME IN EXCESS OF \$200 PER MONTH *(As of 10/86)*

16. If your primary residence will not be occupied by your dependents, list the average monthly expenses you will incur and attach supporting documents for Items A-F claimed. For example: rental agreement; utility bills.

A. Rent or Basic Mortgage Payment ..... \$ \_\_\_\_\_

B. Property Taxes ..... \$ \_\_\_\_\_

C. Fire Insurance, etc. .... \$ \_\_\_\_\_

D. Utility Charges ..... \$ \_\_\_\_\_

E. Telephone Service at primary residence ..... \$ \_\_\_\_\_

F. Garbage, Water, Sewer ..... \$ \_\_\_\_\_

TOTAL COST PER MONTH *(Total of A-F)* ..... \$ \_\_\_\_\_

Less monthly rental income *(if primary residence is rented to others)* ..... \$ \_\_\_\_\_

Net cost per month ..... \$ \_\_\_\_\_

The primary residence must be available to the employee upon the termination of the LTA. Child support and spousal support payments may not be included in the monthly expenses incurred. A deduction for depreciation is not allowed--a primary residence is not considered rental property.

***I certify that the above information is correct, and I understand that if there is any change in any portion of the above, I must complete and submit a new form. I have read DPA Regulations 599.619 and 599.621 and I request the following subsistence allowance(s):***

- ☐ No allowance
- ☐ Short-term allowance until long-term accommodations are located *(maximum 30 consecutive days at the department's discretion)*
- ☐ Short-term allowance for more than 30 consecutive days. This requires the approval of the Department Director or designee to be attached.
- ☐ Full Long-term allowance.                      Effective \_\_\_\_\_
- ☐ One-half Long-term allowance.                      Effective \_\_\_\_\_

EMPLOYEE'S SIGNATURE	DATE SIGNED	APPROVAL RECOMMENDED <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE
		SUPERVISOR'S SIGNATURE	

**FOR HEADQUARTERS USE ONLY**

Subsistence Rate(s) approved:

Short Term Rate    \$ \_\_\_\_\_      Effective Date \_\_\_\_\_      Number of Days \_\_\_\_\_

Long-Term Rate    \$ \_\_\_\_\_      Effective Date \_\_\_\_\_

APPROVED BY DEPARTMENT HEAD/DIVISION CHIEF	DATE APPROVED	APPROVED BY ACCOUNTING OFFICER	DATE APPROVED
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DISTRIBUTION:      Original--Accounting      Copy--Employee      Copy--Supervisor      Copy--Personnel

## **LONG-TERM ASSIGNMENT (LTA) INFORMATION AND CERTIFICATION OF SUBSISTENCE RATES**

STD. 653 (REV. 6-94) REVERSE *PMC*

### **DEFINITION**

A Long-Term Assignment (LTA) is an assignment which exceeds 30 consecutive days at any one location. While they may not be compensable, trips to the employee's residence or headquarters on the employee's regularly scheduled day(s) off, vacation, Administrative Time Off (ATO), Compensating Time Off (CTO), sick leave, holidays, personal trips, or short-term travel assignments do not interrupt the continuity of the LTA. The LTA terminates when the employee is re-assigned to another geographical area.

### **PRIVACY NOTICE**

Information requested is mandatory. This information is used to determine the proper subsistence rate as provided under Department of Personnel Administration Regulations 599.619 and 599.621. Failure to provide all or any part of such information will result in nonpayment. The principal purpose of the requested information is to ensure that the proper subsistence rate is applied. No known or foreseeable interagency or intergovernmental transfer of collected information exists. Direct any inquiries on information maintenance to your Accounting Office.